

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2008</h3>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/531,981-Conf. #5810
		Filing Date	April 20, 2005
		First Named Inventor	Jordi TORMO I BLASCO
		Examiner Name	J. H. Murray
		Art Unit	1624
TOTAL AMOUNT OF PAYMENT		(\$)	930.00
		Attorney Docket No.	5000-0115PUS1

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account            Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

<b>FEE CALCULATION</b>																						
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>																						
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)															
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)																
Utility	310	155	510	255	210	105																
Design	210	105	100	50	130	65																
Plant	210	105	310	155	160	80																
Reissue	310	155	510	255	620	310																
Provisional	210	105	0	0	0	0																
							<b>Small Entity</b>															
							<b>Fee (\$)</b>															
<b>2. EXCESS CLAIM FEES</b>																						
<b>Fee Description</b>																						
Each claim over 20 (including Reissues)							50															
Each independent claim over 3 (including Reissues)							210															
Multiple dependent claims							370															
							185															
<table style="width: 100%;"> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </table>							Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	_____	_____	_____	_____	<table style="width: 100%;"> <tr> <th colspan="2">Multiple Dependent Claims</th> </tr> <tr> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>_____</td> <td>_____</td> </tr> </table>		Multiple Dependent Claims		Fee (\$)	Fee Paid (\$)	_____	_____
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)																			
_____	_____	_____	_____																			
Multiple Dependent Claims																						
Fee (\$)	Fee Paid (\$)																					
_____	_____																					
HP = highest number of total claims paid for, if greater than 20.																						
<table style="width: 100%;"> <tr> <th>Indep. Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </table>							Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	_____	_____	_____	_____								
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)																			
_____	_____	_____	_____																			
HP = highest number of independent claims paid for, if greater than 3.																						
<b>3. APPLICATION SIZE FEE</b>																						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																						
<table style="width: 100%;"> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </table>							Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	_____	_____	_____	_____	_____						
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)																		
_____	_____	_____	_____	_____																		
_____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____																						
							<b>Fees Paid (\$)</b>															
<b>4. OTHER FEE(S)</b>																						
Non-English Specification, \$130 fee (no small entity discount)																						
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...							810.00															
1251 Extension for response within first month							120.00															

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	32,868
Name (Print/Type)	Andrew D. Weikle	Telephone	(703) 205-8000
		Date	May 9, 2008